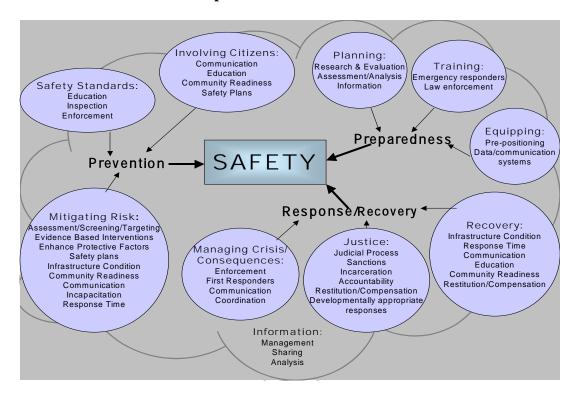
1. Key indicators that will provide the best evidence to the citizen that this result is being achieved.

Indicators	Same, Modified, New?
Reduced preventable loss of life, injury, or property due to	Same indicator, but see
criminal activities, accidents, and natural or man-made	additional measures.
disasters.	
Property & violent crimes per 1,000 population	
• Drinking driver fatalities per 1 billion vehicle miles	
• Injury hospitalizations (unintentional) per 100,000	
population – new measure (DOH)	
Direct insured property losses for selected insurance	
lines- new measure (OIC)	
In amount of a management of a month of a mo	Come indicator but ass
Increased emergency response readiness.	Same indicator, but see
• Percent of K-12 students in schools with geo-mapping completed – new measure (OSPI)	new measures.
State residents per emergency responder	
(police/fire/EMT) – new measure (CJTC, Fire	
Marshal, DOH)	
Percent of population living in areas with Citizen	
Corps Councils – new measure (WCNCS)	
• Percent of population with Community Emergency Response Training – new measure (WCNCS)	
Percent of needed personal protective equipment	
available to emergency responders – new measure	
(EMD)	
In amount of their sofety within their	Come indicator but as a
Increased citizen confidence of their safety within their communities.	Same indicator, but see
	new measure.
 Selected responses to surveys – new measure (e.g. Minnesota Crime Survey questions about feeling 	
safe in neighborhood, or WA Population Survey	
question about awareness of crimes in	
neighborhood).	
8	

2. The Cause and Effect Map for the Result Area



3. An initial assessment of the success or failure of current strategies

A. Does the current budget include funding for all of the significant strategies identified by the teams last time? Which strategies were <u>not</u> funded in the budget?

The current budget includes a version of one of the four <u>major</u> policy innovations the team proposed in 2002 – reducing confinement and supervision of low-risk adult offenders.

The other three major innovation proposals, not enacted or funded, were:

- Convert post-sentence civil commitment of sex predators from a secure inpatient setting to a community-based program with outpatient treatment and intensive supervision.
- Expand existing "community mobilization" programs, now focused on violence and drug abuse prevention, to include disaster preparedness.
- Limit state tort liability for crimes by offenders under supervision, and redirect a portion of payouts and legal costs to the existing victim compensation program.

National Guard "surge capacity," recommended and funded (mostly from federal sources), has been reduced because of overseas deployments, not because of state-level decisions.

Other items not funded or partially funded in the current budget:

- From purchases made by the team or "sold" to other teams:
 - o JRA parole was *reduced* from previous levels (1-C-4).
 - Additional services to crime victims (other than domestic violence) were not funded (3-C-3). However, funding was added in 2004 for domestic violence victim services.
 - Development of an Interoperable Statewide Communication Network was about 1/3 funded, and the Legislature created a planning and governance structure. New federal homeland security funds will further advance this goal.
- From the team's "buy back" list, if available 2003-05 funding were to increase beyond the level set by the 2002 Guidance Team:
 - o Increase in drug courts was funded at about ½ the recommended level.
 - o Increase in prison drug treatment was funded at about 1/4 the recommended level.
 - o Supervising low-risk adult offenders after release was *not funded* (except for specified crime categories including misdemeanors).
 - o Increased supervision of high-risk adult offenders (DOC workload study) was *not funded*.
 - o Increased early local-level intervention for juvenile offenders was *not funded*. The Legislature enacted some locally based alternatives to JRA sentences.
 - o Increased mental health in JRA was partially funded.
 - o Increased cognitive behavioral treatment and family focused case management in JRA were *not funded*.
 - o The driver education subsidy was *not funded*.

Most of the non-funded or partially funded items could be characterized as community-based services to reduce repeat crime, either instead of confinement or after release.

B. Looking at the performance and indicator information available to you at this time, how would you describe progress in achieving this result?

Compared to about ten years ago:

- We are better prepared for terrorist attack or natural disaster.
- We have less violent crime, but about the same rate of property crime. However, recidivism rates are about the same.
- Sexual abuse of children is down by half (based on national data).
- There are fewer vehicle accidents and drunk driving deaths.
- There are fewer serious accidental deaths and injuries of most types (notable exception: fatal drug overdoses have doubled).

C. What are the most significant areas of success in this result area today?

- Emergency responders are better trained and equipped.
- More effective planning is underway for natural or man-made disasters.
- More drug treatment is available in the criminal justice system.
- "Enhanced" 911 coverage lets dispatchers locate callers (but not yet all cell phones).
- Technology helps more in catching criminals (e.g. Livescan, DNA).
- There is more effective monitoring of sex offenders (e.g. registration, notification).
- There is more effective monitoring and supervision of high-risk offenders.
- There is more emphasis on safety of places in adult offender supervision.
- There are more effective interventions to prevent recidivism among offenders.

D. Where do you see the most significant performance gaps? Do these gaps represent the failure of a strategy, the failure to fund a given strategy, or something else?

- Costs of response are related to lack of appropriate investments in prevention.
- Analysis and sharing of existing data among agencies and programs is inadequate.
- Much privately owned infrastructure is too vulnerable. Owners are reluctant:
 - o To acknowledge vulnerability because of fear of higher insurance costs, and
 - o To pre-position replacement equipment when repair will cost less.
- There is inadequate medical "surge capacity" to deal with major disease outbreaks.
- Drug treatment within and outside the criminal justice system is still far short of need
- Treatment for mental illness and co-occurring disorders is far short of need.
- Offenders' transition from confinement to community needs improvement.
- Citizen confidence in safety is reduced by perceptions of injustice in the criminal justice system.

E. Where are the most significant opportunities to improve results?

- Greater focus on prevention, mitigation, preparedness, and community action.
- Increased access to treatment for drug abuse and mental illness, in justice system and communities.
- Greater focus on data-driven strategies.
- Better articulation of data and arguments for investing in prevention. Elected officials need to feel safe making such investments.